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CONFIRMATION NO. 1868

<b>SERIAL NUMBER</b> 10/594,235	<b>FILING or 371(c) DATE</b> 09/25/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 4161	<b>ATTORNEY DOCKET NO.</b> 056291-5302		
<b>APPLICANTS</b> Stephen Robert Wedge, Cheshire, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB05/01079 03/22/2005 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0406450.7 03/23/2004 UNITED KINGDOM 0407755.8 04/06/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/05/2008						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/SHYAM NATHAN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance SN <u>          </u> Initials	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> MORGAN LEWIS & BOCKIUS LLP 1111 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004 UNITED STATES						
<b>TITLE</b> Combination Therapy						
<b>FILING FEE RECEIVED</b> 2300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		